

COVER SHEET FOR AMENDMENT OF POST-TRAVEL SUBMISSION

Instructions: Use this form as a cover sheet for any paperwork you may need to submit to the Office of Public Records in order to make your Privately Sponsored Post-Travel Submission complete in accordance with Rule 35. Only complete this form if you need to submit an amendment to a post-travel filing you have already submitted.

SUBMIT DIRECTLY TO THE OFFICE OF PUBLIC RECORDS IN 232 HART BUILDING

Mike Lynch Name of Traveler:	
Schumer Employing Office/Committee:	···
The Pew Charita Private Sponsor(s) (List all):	able Trusts
September 15-17, 2017 Travel Date(s):	
Description/Title of Attached Forms:	orm (complete version)
	
Dumoso of Amandment (describe the research	Post-travel submission
Purpose of Amendment (describe the reason for must be amended with the Office of Public	
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10/20/17	111141
(Date)	(Signature of Traveler)

Date/Time Stamp:

EMPLOYEE PRE-TRAVEL AUTHORIZATION

<u>Pre-Travel Filing Instructions</u>: Complete and submit this form at least 30 days prior to the travel departure date to the Select Committee on Ethics in SH-220. Incomplete and late travel submissions will <u>not</u> be considered or approved. This form <u>must</u> be typed and is available as a fillable PDF on the Committee's website at ethics.senate.gov. Retain a copy of your entire pre-travel submission for your required post-travel disclosure.

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Name of Traveler:	Mike Lynch	
Employing Office/Committee:	Minority Leader Consultants	SEII. SCHUMER
Private Sponsor(s) (list all): Pew Charitable	Trusts	
Travel date(s): September 15-17, 2017 Note: If you plan to extend the trip for a	ny reason you must notify the Committee.	<u> </u>
Destination(s): Richmond, VA		
Explain how this trip is specifically connected to	the traveler's official or representational duties:	
•	rence for Senate Chiefs of Staff, which will cessary for me to manage Senator Schum	
Name of accompanying family member (if any) Relationship to Employee: \square Spouse \square Ch I certify that the information contained in this form $ \frac{2! + 36}{(Date)} $		
TO BE COMPLETED BY SUPERVISING SENAT Secretary for the Majority. Secretary for the Minority	OR/OFFICER (President of the Senate, Secretary of the y, and Chaplain):	Senate, Sergeant at Arms,
Sen. Charles Schumer	hereby authorize Mike Lync	h
(Print Senator's/Officer's Name)	(Print Traveler's	Name)
related expenses for travel to the event describe	cept payment or reimbursement for necessary trans d above. I have determined that this travel is in coand will not create the appearance that he or she is	nnection with his or her
I have also determined that the attendance of the of the Senate. (signify "yes" by checking box)	e employee's spouse or child is appropriate to assis	it in the representation
(Date)	(Signature of Supervising Sena	tor/Officer)